Case 3:01-cv-01351-TEH Document 1999 Filed 01/09/2009 Page 1 of 9 **FUTTERMAN & DUPREE LLP** 1 MARTIN H. DODD (104363) 160 Sansome Street, 17th Floor 2 San Francisco, California 94104 Telephone: (415) 399-3840 3 Facsimile: (415) 399-3838 martin@dfdlaw.com 4 Attorneys for Receiver 5 J. Clark Kelso 6 7 UNITED STATES DISTRICT COURT 8 NORTHERN DISTRICT OF CALIFORNIA 9 10 Case No. C01-1351 TEH MARCIANO PLATA, et al., 11 Plaintiffs, 12 RECEIVER'S SUPPLEMENTAL APPLICATION NO. 8 FOR ORDER 13 ٧. WAIVING STATE CONTRACTING STATUTES, REGULATIONS AND ARNOLD SCHWARZENEGGER, et al., 14 **PROCEDURES** Defendants. 15 16 17 INTRODUCTION 18 Receiver J. Clark Kelso ("Receiver") submits this Supplemental Application No. 8 for an 19 order waiving, to the extent necessary, any requirement that the Receiver comply with State 20 statutes, rules, regulations and/or procedures, governing the notice, bidding, award and protests 21 with respect to contracts ("State Contracting Procedures"), so as to permit the Receiver to extend 22 and modify an existing contract with Health Management Associates ("HMA"), the purpose of 23 which is to analyze, design and implement quality improvement programs to eliminate 24 preventable suffering and deaths, including specifically pilot projects for preventing suffering 25 and deaths from diabetes and Hepatitis C. Pursuant to this Court's Order, dated January 25, 2008 26 (Docket # 1066), waiving State Contracting Procedures, HMA is currently under contract with the 27 Receiver and has assisted in the development and implementation of a quality improvement 28

program focused on preventing suffering and death from asthma. In the January 25 Order, this Court required the Receiver to submit separate applications with respect to new or additional quality improvement initiatives. This Application is intended merely to apply the waiver in the January 25 Order so as to permit the Receiver to extend and modify the existing contract with HMA.

The Receiver makes this Application on the grounds that if he were required to comply fully with existing State Contracting Procedures, he would be unreasonably constrained in his ability to accomplish the goals the Court has set for him. In order for the Receiver to fulfill in a timely fashion the charge this Court has given him, the Receiver requires the waiver requested in this Application so that he is not hampered by the same bureaucratic procedures that have prevented the State itself from solving the problems of the California prison medical delivery system.

In compliance with this Court's January 25 Order, the Receiver requested a stipulation from the parties with respect to this Supplemental Waiver Application No. 8. Plaintiffs' counsel agreed to so stipulate. Defense counsel declined to stipulate, but indicated that defendants had no objection to entry of an order continuing the waiver of State Contracting Procedure to permit the extension of the quality improvement projects which are the subject of this Application. Declaration of Martin H. Dodd, filed herewith, ¶¶ 2-3. Absent such a stipulation, the Receiver has submitted this Application.

FACTUAL BACKGROUND

A. Appointment of the Receiver.

In the face of the unprecedented and ongoing crisis in the California prison health care system and the apparent inability of the State to address that crisis, on February 14, 2006, this Court appointed the Receiver and gave him a mandate to move forward expeditiously to remedy the deficiencies in the system. The Court vested in the Receiver the duty to control, oversee, supervise and direct all administrative, personnel, financial, accounting, contractual, legal and other operational functions of the medical delivery component of the California Department of Corrections and Rehabilitation ("CDCR"). In addition to those very broad powers, this Court

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established a procedure by which the Receiver could request waivers of State laws and contracts when necessary for him to accomplish his work.

In the event, however, that the Receiver finds that a state law, regulation, contract, or other state action or inaction is clearly preventing the Receiver from developing or implementing a constitutionally adequate medical health care system, or otherwise clearly preventing the Receiver from carrying out his duties as set forth in this Order, and that other alternatives are inadequate, the Receiver shall request the Court to waive the state or contractual requirement that is causing the impediment.

Order Appointing Receiver ("Order"), filed February 14, 2006, p. 5:4-9.

B. Receiver's Master Application for a Waiver of State Contracting Law.

On April 17, 2007, the Receiver filed a master application for an order (1) waiving any requirement that the Receiver comply with State Contracting Procedures with respect to the contracts necessary to implement certain projects described therein; and (2) approving substituted notice, bidding and contract award procedures for such projects (the "Master Application"). In that Master Application, the Receiver set out in some detail the complex web of State Contracting Procedures impeding his ability to fulfill his court-ordered mandate to provide constitutional medical care to the State's prisoners, and his proposed process to streamline those procedures to accomplish the goals the Court has set out for him. The Master Application was designed to thoroughly address the legal and factual rationale for waivers of State Contracting Procedures in the context of this receivership, and to permit subsequent follow-up waiver applications (such as this one) without the need to repeat such rationale. Master Application, p. 3:11-15.

C. The Receiver's Supplemental Waiver Application No. 2, The Court's January 25, 2008 Order Granting In Part And Denying In Part That Application And The Receiver's Attempt To Obtain A Stipulation Of The Parties With Respect To This Supplemental Waiver Application.

On November 20, 2007, the Receiver submitted his Supplemental Application No. 2 for an Order Waiving State Contracting Statutes, Regulations, and Procedures and Approving Receiver's Substitute Procedure for Bidding and Award of Contracts ("Supplemental Application No. 2"). Supplemental Application No. 2 concerned the Receiver's quality improvement Access-

to-Care projects, including specifically the Asthma Initiative, which was designed to eliminate preventable deaths due to undiagnosed or uncontrolled asthma.

On January 25, 2008, the Court entered its Order granting in part and denying in part Supplemental Application No. 2. In the January 25 Order, the Court waived State contracting law, regulations and procedures to the extent necessary to permit the Receiver to undertake the first quality improvement project, focused on asthma, but denied Supplemental Application No. 2 without prejudice to the extent that it sought to apply to unspecified future, as yet unspecified, quality improvement projects. The Court ruled that "[s]hould the need for a waiver arise once the Receiver develops the contemplated quality improvement projects, the Court will re-evaluate an application for a waiver at that time. To reduce inefficiency, the Receiver shall attempt to seek a stipulation from the parties before filing any further supplemental applications for waivers of state law." Docket # 1066, p. 3.

As indicated above, the Receiver obtained plaintiffs' stipulation and attempted, but failed, to procure the stipulation of defendants with respect to this Application. Defendants did, however, express that they had no opposition to the relief requested.

D. Description Of The Projects That Are The Subject Of This Supplemental Application. 1

Following entry of the January 25 Order, the Receiver entered into a contract with HMA for technical assistance, education and training, and evaluation services for the purpose of developing and implementing the quality improvement program, with an initial focus on asthma. Working with HMA, the Receiver's staff brought together teams from six pilot prisons to share their ideas and experience, using a chronic care redesign model known as a "learning collaborative." In November 2008 the six pilot sites completed the last of four "collaborative learning sessions." Their performance in implementing the chronic care model and in taking advantage of the collaborative approach far exceeded expectations.

The teams from these six pilot facilities have begun to develop the knowledge, skills, and strategies that will enable them to redesign care for patients with any chronic disease, including:

¹ The facts set forth herein are based on the Declaration of Dr. Terry Hill, M.D., filed herwith.

- a. A new organizational framework of team-based, patient-centered coordinated care with unambiguous responsibility for individual patient outcomes;
- b. Proven methods for continuously improving the processes of care;
- c. Evidence-based standards of chronic disease care;
- d. A new and powerful information system support tool, the chronic disease patient registry; and,
- e. The ability to identify the sickest and most complicated of the chronically ill patients who can receive focused case management.

To leverage the knowledge and expertise developed by the chronic care teams, the Receiver's current plan is that, beginning in January 2009, the chronic care team and leaders from the six pilot sites will work with HMA to disseminate the chronic disease model and to create the local improvement teams at the remaining 27 prisons, specifically with respect to asthma. In addition, the six pilot sites will add two additional chronic diseases, diabetes mellitus and hepatitis C, to their programs. The Receiver has chosen these two diseases because of their high prevalence in the inmate-patient population, because they have serious potential to cause suffering and death, and because there are known standards which should guide care. As with asthma, the experience of these six pilot sites will serve as the basis for the change packages and strategies to be used for dissemination to the remaining 27 prisons later in 2009.

By the end of 2009, all prisons will have trained local leadership in chronic care, and all will have implemented the patient-centered, team-based chronic care model appropriate for managing any chronic illness using evidence-based, standardized processes and measurements. As Dr. Hill emphasizes in his accompanying declaration, the speed and scope of the proposed 2009 initiatives exceed industry standards even among the highest-performing and most richly-endowed healthcare delivery systems.

As a result of the demonstrated success of the Access-to-Care pilot focusing on asthma, and the importance of HMA to that success, the Receiver believes that continued progress at the pace anticipated requires continued HMA expertise and leadership. Because both the January 25 Order and HMA's contract were focused on asthma, the addition of diabetes and hepatitis C to

contract. Thus, this Supplemental Application seeks an Order waiving State contracting law and procedure to the extent that such a waiver may be necessary to permit the Receiver to modify and extend HMA's existing contract to assist in the implementing the Access-to-Care program with respect to the two additional diseases.

E. Good Cause Exists To Waive State Contracting Law And Procedures For The

the Access-to-Care Initiative program will require modifications to and extensions of HMA's

E. Good Cause Exists To Waive State Contracting Law And Procedures For The Above-Referenced Projects To Ensure That Receiver Can Achieve His Court-Ordered Mandate To Provide Constitutional Medical Care To The State's Prisoners.

As set forth in Receiver's Master Application, the State Contracting Procedures are complex, cumbersome and extremely time-consuming and have had a real, day-to-day and very serious adverse impacts on the CDCR's ability to provide adequate medical care in its prisons and on the Receiver's ability to implement necessary, timely, and inter-related remedial measures. The Receiver submits that, on its face, State Contracting Procedures are much too slow, much too bureaucratic and insufficiently nimble to accommodate the Receiver's efforts to bring the projects described to fruition or to make meaningful change to the prison healthcare system in a timely fashion.

This Court has found that the process by which State contracts are developed, reviewed, bid and awarded contributes to and exacerbates the numerous failings in the prison health care system. See FFCL at pp. 26-27. In the June 4, 2007 Order, the Court noted that "[t]here is no dispute that it would effectively stymie the Receiver's efforts to implement the projects identified in his [Master] Application in a timely manner if full compliance with the State's traditional contracting processes were required." June 4, 2007 Order at p. 3:18-20. Based on the Receiver's showing in the Master Application, the Court granted a waiver of State Contracting Procedures for those projects listed in Receiver's Master Application in the June 4, 2007 Order.

For the same reasons, the Court should grant this Supplemental Application No. 8. As with the proposed contract to pursue the asthma pilot portion of the Access-to-Care Initiative, State contracting procedures, if required to be followed with respect to the proposed additional quality improvement projects, would interfere with or impede the Receiver in the performance of

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CERTIFICATE OF SERVICE

The undersigned hereby certifies as follows:

I am an employee of the law firm of Futterman & Dupree LLP, 160 Sansome Street, 17th Floor, San Francisco, CA 94104. I am over the age of 18 and not a party to the within action.

I am readily familiar with the business practice of Futterman & Dupree, LLP for the collection and processing of correspondence.

On January 9, 2009, I served a copy of the following document(s):

DECLARATION OF RECEIVER J. CLARK KELSO REGARDING COORDINATION AGREEMENT FOR TRANSITION, ACTIVATION AND MANAGEMENT OF 10,000 BED PROJECT

by placing true copies thereof enclosed in sealed envelopes, for collection and service pursuant to the ordinary business practice of this office in the manner and/or manners described below to each of the parties herein and addressed as follows:

BY FACSIMILE: I caused said document(s) to be transmitted to the telephone number(s) of the addressee(s) designated.

X BY MAIL: I caused such envelope(s) to be deposited in the mail at my business address, addressed to the addressee(s) designated below. I am readily familiar with Futterman & Dupree's practice for collection and processing of correspondence and pleadings for mailing. It is deposited with the United States Postal Service on that same day in the ordinary course of business.

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